



Liquor Control Board
Licensing and Regulation
PO Box 43098
Olympia WA 98504-3098
Phone: (360) 664-1600
Fax: (360) 753-2710

Liquor License No.

Financial/Source of Funds Statement for Person or Entity Loaning, Gifting, or Investing Money

Please type or print clearly in dark ink. Complete all spaces or print N/A in spaces that do not apply. Attach additional sheets as needed in same format.

NAME OF BUSINESS AND PERSON TO WHICH MONEY IS BEING LOANED, GIFTED OR INVESTED::					
YOUR NAME/ENTITY NAME: <i>Last</i>		<i>First</i>		<i>Middle</i>	
SOCIAL SECURITY NUMBER:			DATE OF BIRTH:		
MAILING ADDRESS: <i>Street/Route/PO Box</i>		<i>City</i>	<i>County</i>	<i>State or Country</i>	<i>Zip Code</i>
DAY PHONE ()	EVENING PHONE ()		FAX NUMBER ()		

EMPLOYMENT HISTORY OR DATES ENTITY HAS BEEN IN BUSINESS

EMPLOYMENT HISTORY (List employment, self-employment, military service, school attendance or unemployment for the last 5 years).					
Dates From - To:		Title:		Employer/School	
ADDRESS: Street or Route		City		State or Country	
Dates From - To:		Title:		Employer/School	
ADDRESS: Street or Route		City		State or Country	
Dates From - To:		Title:		Employer/School	
ADDRESS: Street or Route		City		State or Country	

ASSETS

A BANK and INVESTMENT ACCOUNTS (List all bank and investment accounts you have signature authority over, and any accounts of which you are the beneficiary).				
BANK NAME	ACCOUNT TYPE	ACCOUNT NUMBER	BALANCE	AUTHORIZED SIGNATURE(S)
1.				
2.				
3.				
4.				

B INCOME	SELF/ENTITY	SPOUSE (if applicable)
MONTHLY SALARY	\$	\$
AVERAGE MONTHLY BONUSES/COMMISSIONS/DIVIDENDS	\$	\$
OTHER MONTHLY INCOME	\$	\$

Original - Agency

Copy - Applicant

Liquor License No.

C TOTAL CASH OTHER THAN IN BANK: \$	LOCATION OF CASH:
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D NOTES AND ACCOUNTS RECEIVABLE (Moneys owed to you and/or your business - - including this loan)

FROM WHOM (Full name, address)	MONTHLY PYMT	CURRENT BALANCE	DUE DATE

E REAL ESTATE OWNED

ADDRESS OF PROPERTY COVERED	COUNTY	TOWNSHIP/RANGE/SECTION	TITLE IN NAME OF	VALUE OF LAND AND/OR BUILDING	MONTHLY RENT PAID TO YOU

F VEHICLES/BOATS OWNED

YEAR	MAKE	MODEL	VEHICLE/VESSEL ID NUMBER	FAIR MARKET VALUE

LIABILITIES**A NOTES, ACCOUNTS, BILLS, AND CREDIT CARDS OWING (Over \$500)**

TO WHOM (Full Name, Address)	CURRENT BALANCE	MONTHLY PYMT

B MORTGAGES AND CONTRACT OWING (Including rent/lease payments)

ADDRESS OF PROPERTY COVERED	FULL NAME OF LENDER / LANDLORD	CURRENT BALANCE	MONTHLY PYMT

Do you have (circle one) any interest in/or do you expect to take a percentage of the business profits in exchange for your loan/investment/gift? ☐ No ☐ Yes If yes, what percent? ____%

SOURCE OF FUNDS: THE AMOUNT LOANED, GIFTED, OR INVESTED: \$ __

DOLLAR AMOUNT	INSTRUCTIONS	EXPLANATION (Attach documentation of the following source of funds)
CASH PAID \$ ____	Explain the original source of the cash used. Explain where the cash is or was kept.	
CASH BORROWED \$ ____	Explain where the cash was borrowed from. Provide the name and address of the lender.	

I certify that this Financial/Source of Funds Statement is true and accurate as of this date. I hereby authorize investigation of my financial records and other sources as necessary.

Signature	Print Name	Date

Original - Agency

Copy - Applicant